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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration
Submitted
with Initial
Filing

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.18 (e))
required)

Attorney Docket Number

First Named Inventor

Hummel

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Optical System

the specification of which

(Title of the Invention)

is attached hereto
OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number

and was amended (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (mmddyy/yy)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
10000193.9	Germany	01/05/2000	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application, or 35 U.S.C. 365(e) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Customer Number	→	Place Customer Number or Bar Code Label here
OR		
<input type="checkbox"/> Registered practitioner(s) name/registration number listed below		

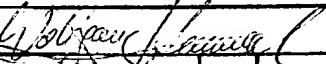
Name	Registration Number	Name	Registration Number
Jody L. Factor Jovan N. Jovanovic William L. King	34157 40039 46830		

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below

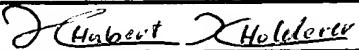
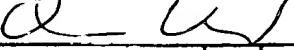
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Country	USA	Telephone	312-578-0400		Fax 312-578-8220

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle if any)		Family Name or Surname					
Wolfgang		Hummel					
Inventor's Signature					Date	01.12.00	
Residence: City	Schwäbisch Gmünd	State		Country	Germany	Citizenship	Germany
Post Office Address	Gartenstr. 21						
Post Office Address							
City	Schwäbisch Gmünd	State		Zip	D-73525	Country	Germany

Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Hubert		Holderer					
Inventor's Signature					Date	1.92.2000	
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Post Office Address							
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Rudolf		Von Bünau					
Inventor's Signature					Date	12/14/00	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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Christian		Wagner					
Inventor's Signature					Date	12/10/00	
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Post Office Address							
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Jochen		Becker				
Inventor's Signature	<i>Jochen Becker</i>					Date <u>13.11.01</u>
Residence: City	Oberkochen	State	Country	Germany	Citizenship	Germany
Post Office Address	Junoweg 10					
Post Office Address						
City	Oberkochen	State	Zip	D-73447	Country	Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Stefan		<i>Stefan Kellner</i>				
Inventor's Signature	<i>Stefan Kellner</i>					Date <u>13.11.</u>
Residence: City	Oberkochen	State	Country	Germany	Citizenship	Germany
Post Office Address	Frühlingstr. 7					
Post Office Address						
City	Oberkochen	State	Zip	D-73447	Country	Germany